

POSITION	ID NO.	DATE
CLASSIFIER	299	12-10-93
EXAMINER	299	12-10
TYPIST	362	3-15-94
VERIFIER	120	3/15/94
CORPS CORR.		
SPEC. HAND	412	3-9-94
FILE MAINT.	407	1-6-94
DRAFTING		

GROUP 350

440 22 PH 4: 22

INDEX OF CLAIMS

Claim	Date
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SYMBOLS

—	Rejected
—	Allowed
(Through numbers)	Canceled
—	Restricted
N	Non-elected
—	Interference
A	Appeal
O	Objected

Claim	Date
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